

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, CA 90020 (213) 351-5602

August 24, 2012

GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

Board of Supervisors

To:

Supervisor Zev Yaroslavsky, Chairman

Supervisor Gloria Molina

Supervisor Mark Ridley-Thomas

Supervisor Don Knabe

Supervisor Michael D. Antonovich

From:

Philip L. Browning Bash Vebls

Director

HOMES OF HOPE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a review of the Homes of Hope Foster Family Agency (FFA) in January 2012, at which time the agency had 141 Department of Children and Family Services (DCFS) placed children in 64 homes. The placed children's overall average length of placement was seven months, and the average age was 11.

Homes of Hope FFA is located in the First Supervisorial District and provides services to Los Angeles County DCFS foster youth. According to Homes of Hope FFA's program statement, its goal is "to ensure children are provided with a continuity of care, nurturance and services that will meet their needs and those of their families as prescribed by their Needs and Services Plans. A secondary goal is the achievement of legal permanency for children. When family reunification has been determined by the court and the placing Agency is no longer a viable option and a child's case goal has been determined to be the achievement of legal permanency through adoption or guardianship, the Agency will make every effort to achieve these goals." Homes of Hope FFA is licensed to serve children ranging from birth through 17.

Each Supervisor August 24, 2012 Page 2

For the purpose of this review, 12 children were selected for the review. Nine placed children were interviewed, one child had been replaced, one child was on a school field trip and one young adult's work schedule made him unavailable for an interview. All 12 sampled children's case files were reviewed. Four certified foster parents' files were reviewed; five discharged children's files were reviewed; and four staff files were reviewed for compliance with Title 22 regulations and the County contract requirements.

Ten placed children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm that documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess Homes of Hope FFA's compliance with the County contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, 12 placed children's case files, four certified foster parent files, five discharged children's files, and four personnel files. Four certified foster homes were visited and the foster parents were interviewed to assess the quality of care and supervision provided to children. Nine placed children were interviewed to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Overall, the nine children interviewed reported feeling safe, having been provided with good care and appropriate services, were comfortable in their environment and were treated with respect and dignity.

The deficiencies noted during the monitoring review were related to late Needs and Services Plans (NSPs) some Children's Social Worker (CSW) contacts were not noted in the NSP; one age-appropriate child was not involved in the Youth Development Services (YDS); there were several late initial medical and dental examinations; and there was no psychiatric evaluation for one child prescribed psychotropic medication.

Based on our review, the aforementioned deficiencies revealed the need for more thorough documentation. Additionally, routine monitoring of the files by supervisory staff would appear to eliminate the documentation issues identified. Overall, Homes of Hope FFA is providing good care and services to placed children and support to the certified foster parents, which is evident in the relationships formed with the children, agency staff, and certified foster parents.

Each Supervisor August 24, 2012 Page 3

In conclusion, Homes of Hope FFA was receptive to implementing some systemic changes to improve their compliance with regulations and the contract terms. The Administrator agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following were the notable findings of our review:

- Of the 12 children's files reviewed, one child's initial NSP was one day late. The child was placed on June 24, 2011, and the initial NSP was dated July 25, 2011. The Administrator stated that treatment plans are tracked by the Quality Assurance Department on the Social Worker Caseload Tracking log and on Foster Trak to ensure that the social workers meet due date requirements. As part of the Corrective Action Plan (CAP), the deadline dates will be discussed at the Administrator's meeting with the supervisors to ensure timely submittal of children's NSPs by the social workers.
- Of the 12 children's files reviewed, one child had a late updated NSP. The
 Administrator stated that treatment plans are tracked by Quality Assurance
 Department on the Social Worker Caseload Tracking log and on Foster Trak.
 Additionally, as part of the CAP, the NSP deadline dates will be discussed with
 the supervisors at the Administrator's meeting to ensure timely submittal of
 NSPs.
- Of the 12 children's files reviewed, one child's adjustment to placement was the same from the initial NSP to the first Quarterly NSP report. In the CAP, the Administrator stated that the social worker supervisors will ensure that the treatment plans show progress that is comprehensive and obtainable by comparing the old treatment plan with the newly submitted report.
 - Homes of Hope FFA representatives attended the NSP training conducted by OHCMD in January 2012, and it is anticipated there will be improvement in this area during our next review.
- Of the 12 children's files reviewed, one age-appropriate child was not involved in YDS. The Administrator stated the FFA social worker will follow-up with the Children's Social Worker to ensure the youth is enrolled in the YDS Program. The agency will accomplish this by tracking when a youth will become eligible for these services. The FFA social worker will initiate a letter to the CSW to remind them that the youth needs to be enrolled. This action will also document the agency's efforts to facilitate and encourage the youth's involvement in YDS.

- Of the 12 children's files reviewed, two children had late initial medical examinations and four children had late initial dental examinations. The Administrator stated that initial medical and dental examinations are expected within the required period of time and before the due date. The FFA social worker will document the attempts, denials for medical or dental care, and why an examination was not completed on time. This will be documented on the minor's weekly progress notes.
- Of the 12 children's files reviewed, one child prescribed psychotropic medication did not have a current psychiatric evaluation. As part of the CAP, the Administrator stated that the agency will maintain a psychotropic medication record book that will show supervisor's efforts in obtaining PMA activity and the child's psychiatric evaluations. The medication record book will contain letters and faxes documenting efforts to obtain the current PMA.

Homes of Hope was given contact information to DCFS Bureau of the Medical Director so that the FFA can contact them if there is a problem in obtaining PMAs in a timely manner.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held March 6, 2012.

In attendance:

Sukhwinder Singh, Executive Director, Jorge Razo, Administrator, Maria Casteneda, Quality Assurance Supervisor, Homes of Hope FFA, and Elaine Lane, Monitor, DCFS, OHCMD.

Highlights:

The Executive Director stated she was in agreement with our findings and that the agency would make the corrections to improve its compliance with regulations and the contract.

Homes of Hope FFA submitted an approved written CAP, which addressed each recommendation noted in this compliance report. The approved CAP is attached.

We will assess for full implementation of the recommendations during our next monitoring review.

Each Supervisor August 24, 2012 Page 5

If you have any questions, please call me or your staff may contact Aldo Marin, Board Relations Manager at (213) 351-5530.

PLB:RRS:KR: EAH:NF:el

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Sukhwinder Singh, Executive Director, Homes of Hope FFA
Jean Chen, Regional Manager, Community Care Licensing

HOMES OF HOPE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

1107 S. Glendora Ave. West Covina, CA 91790 License Number: 197803171

	Contract Compliance Monitoring Review	Findings: January 2012
I	Licensure/Contract Requirements (6 Elements)	
	 Timely Notification for Child's Relocation SIRs Documented and Cross-Reported Runaway Procedures Community Care Licensing Citations, Out-of-Home Care Management Division Reports on Safety and Physical Deficiencies If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training FFA pays Certified Foster Parents Whole Foster Family Home Payments 	Full Compliance (ALL)
П	Certified Foster Homes (13 Elements)	
	 Home Study Prior to Certification Contact with References/Including Check with OHCMD Safety Inspection Prior to Certification Timely DOJ, FBI, CACI Health Screening Prior to Certification Required Training Prior to Certification Current Certificate of Approval on File Including Capacity Home Inspection/Evaluations for Re-certification Completed Training Hours for Re-certification CPR/First Aid/Water Safety Certificates CDL/Auto Insurance Other Adults: DOJ/FBI/CACI Transportation 	Full Compliance (ALL)

III	Facility and Environment (8 Elements)	
	 Exterior Well Maintained Common Areas Maintained Children's Bedrooms/Interior Maintained Sufficient Recreational Equipment Sufficient Educational Resources Adequate Perishable and Non Perishable Food Disaster Drills Conducted Allowance Logs 	Full Compliance (ALL)
IV	Maintenance of Required Documentation and Service Delivery (11 Elements)	
	 DCFS CSW Authorization to Implement NSPs Children's Participation in the Development of NSPs NSPs Implemented and Discussed with Foster Parents Children's Progress Towards Meeting Goals Timely Developed Initial NSPs with Child Timely Comprehensive Initial NSPs with Child Therapeutic Services Received Recommended Assessments/Evaluations Implemented DCFS CSWs Monthly Contacts Documented Timely Developed Updated NSPs with Child Timely Comprehensive Updated NSPs with Child 	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Needs Improvement 11. Needs Improvement
V	Education and Workforce Readiness (7 Elements)	
	 Child Enrolled in School Within Three Days Child Attended School as Required Agency Facilitates Child's Educational Goals Child's Academic and/or Attendance Increase Current IEPs Maintained Current Report Cards Maintained Agency Facilitates Child's Participation in YDS/ Equivalent/Vocational Programs 	 Full Compliance Needs Improvement

VI	Health and Medical Needs (6 Elements)	
	 Initial Medical Examinations Conducted Initial Medical Examinations Timely Follow-up Medical Examinations Timely Initial Dental Examinations Conducted Initial Dental Examinations Timely Follow-up Dental Examinations Timely 	 Full Compliance Needs Improvement Full Compliance Full Compliance Needs Improvement Full Compliance
VII	Psychotropic Medications (2 Elements)	
	Current Court Authorization for Administration of Psychotropic Medication Current Psychiatric Evaluation Review	Full Compliance Needs Improvement
VIII	Personal Rights and Social Emotional Well-Being	
	 Children Informed of Foster Home's Policies and Procedures Children Feel Safe Satisfaction with Meals and Snacks Foster Parents Treatment of Children with Respect and Dignity Appropriate Rewards and Discipline System Children Allowed Private Visits, Calls, and Correspondence Children Free to Attend Religious Services/Activities Reasonable Chores Children Informed About Psychotropic Medication Children Aware of Right to Refuse Psychotropic Medication Children Informed About Voluntary Refusal of Medical and Dental Care Children Participation in At-Home, School, Community Activities Children Participation in Extra-Curricular Activities 	Full Compliance (ALL)

12.6		
IX	Personal Needs/Survival and Economic Well-Being (8 Elements)	
	(o Elements)	
	Clothing Allowance	Full Compliance (ALL)
	2. On-going Clothing Inventories of Adequate Quantity	
	 On-going Clothing Inventories of Adequate Quality Involvement in Selection of Clothing 	
	Provision of Personal Care Items	
	Minimum Monetary Allowances	
	7. Management of Allowance	
	Encouragement and Assistance with Life Book	
Х	<u>Discharge Children</u> (3 Elements)	
	Stabilization of Placement Prior to Discharge	Full Compliance (ALL)
	Discharge Summary Completed	, an earnprise (* 122)
	Child Completed High School	
XI	Personnel Records (15 Elements)	
	(** = *********************************	
	DOJ Timely Submitted	Full Compliance (ALL)
	 FBI Timely Submitted (After January 1, 2008) CACIs Timely Submitted 	
	CACIs Timely Submitted Signed Criminal Background Statement Timely	
	Education/Experience Requirement	
	Employee Health-Screening Timely	
	7. Valid Driver's License	
	 Signed Copies of FFA Policies and Procedures Initial Training Documentation 	2
	10. One-Hour Training of Child Abuse Reporting	
	11. CPR Training Documentation	
	12. First-Aid Training Documentation	
	13. On-going Training Documentation14. Social Workers Appropriate Case Ratio	8
	14. Godiai Workers Appropriate Gase Natio	

HOMES OF HOPE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

1107 S. Glendora Ave. West Covina, CA 91790 License Number: 197803171

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the January 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based our review, Homes of Hope FFA was in full compliance with seven of 11 sections of our contract compliance review: Licensure/Contract Requirements; Certified Foster Homes; Facility and Environment; Personal Rights and Social Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records. The following report details the results of our review.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of 12 children's files and/or documentation from the provider, Homes of Hope FFA fully complied with nine of 11 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

We noted that some updated NSPs were not comprehensive and were not timely. The agency representatives responded that they would provide training to social workers to correct the updated NSP deficiencies.

Recommendations:

Homes of Hope FFA's management shall ensure that:

- Updated NSPs are completed timely.
- Updated NSPs are comprehensive and specific to the child.

EDUCATION AND WORKFORCE READINESS

Based on our review of 12 children's files and/or documentation from the provider, Homes of Hope FFA fully complied with six of seven elements reviewed in the area of Education and Workforce Readiness.

HOMES OF HOPE FOSTER FAMILY AGENCY PAGE 2

We noted that one age-appropriate child was not involved in YDS services. The Administrator stated that the agency will provide a written request to the CSWs of all children 14 years and older that they be enrolled in YDS services.

Recommendation:

Homes of Hope FFA's management shall ensure that:

3. All foster children 14 years and older are enrolled in YDS services.

HEALTH AND MEDICAL NEEDS

Based on our review of 12 children files and/or documentation from the provider, Homes of Hope FFA fully complied with four of six elements reviewed in the area of Health and Medical Needs.

We noted that two children's initial medical examinations were late one day and four children's initial dental examinations were seven days late. The Administrator stated that staff will be trained on ways to obtain timely initial medical examinations and timely initial dental examinations.

Recommendation:

Homes of Hope FFA's management shall ensure that:

- All children receive timely initial medical examinations.
- All children receive timely initial dental examinations.

PSYCHOTROPIC MEDICATIONS

Based on our review of 12 children files and/or documentation from the provider, Homes of Hope FFA fully complied with one of two elements reviewed in the area of Psychotropic Medications.

• We noted that one child prescribed psychotropic medication did not have a current psychiatric evaluation. The Quality Assurance Supervisor stated that Homes of Hope FFA no longer has a Mental Health section and obtaining timely psychiatric evaluations and consultations from an outside facility has been difficult. In addition, the Administrator stated that the agency will maintain a psychotropic medication record book that will show the supervisors' efforts in obtaining PMA activity and the children's psychiatric evaluations. The medication record book will contain letters and faxes documenting efforts to obtain the current PMA. Also, the agency will make every effort to obtain psychiatric evaluations in a timely manner.

HOMES OF HOPE FOSTER FAMILY AGENCY PAGE 3

Recommendation:

Homes of Hope FFA's management shall ensure that:

6. All children on psychotropic medication have a current psychiatric evaluation.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S COMPLIANCE REPORT

Objective

Determine the status of the recommendations reported in the A-C's prior monitoring report.

Verification

We verified whether the outstanding recommendations from the A-C's last compliance review dated April 8, 2009, were implemented.

Results

The A-C's prior compliance report contained 11 outstanding recommendations. Homes of Hope FFA was to ensure that staff monitor foster homes to ensure they comply with the County contract and Title 22 regulations; foster parents secure knives, detergents, cleaning solutions, alcoholic beverages and other items that could pose a safety hazard: foster homes maintain a comfortable temperature for children; children's initial dental examinations are conducted within the required timeframes, that children taking psychotropic medications have the medications incorporated into their NSPs; NSPs contain goals that are measurable and specific; and the children's DCFS Children's Social Workers (CSWs) have approved them; the Quarterly reports for children 14 and over, contain an Emancipation Preparation Contract; the Termination reports contain all required information; children are offered the opportunity to participate in extracurricular activities of their choice; and that staff working on the County contract possess the education required. Based on our follow-up of these recommendations, Homes of Hope FFA fully implemented nine of 11 recommendations from the A-C's April 8, 2009 report. Homes of Hope FFA did not fully implement the recommendation regarding timely initial dental examinations, nor was the recommendation regarding children 14 years and over being involved in YDS (Emancipation Preparation) services fully implemented. Both issues are noted in recommendations 5 and 7 of this report.

Recommendation:

Homes of Hope FFA's management shall ensure that:

7. They fully implement the outstanding recommendation from the A-C's April 8, 2009 report, which is also noted as recommendations 3 and 5 of this report.

HOMES OF HOPE FOSTER FAMILY AGENCY PAGE 4

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Homes of Hope FFA has not been posted by the A-C.



Homes of Hope Foster Family Agency

1107 S. Glendora Avenue, West Covina, CA 91790

(626) 814-9085 or 1-888-94-4-HOPE

Main Fax: (626) 814-2276

April 1, 2012

Elaine Lane, Monitor Bureau of Home Care Management Division 9320 Telstar Avenue, Suite 211 El Monte, CA 91731

RE:

HOMES OF HOPE FOSTER FAMILY AGENCY MONITORING REVIEW FIELD VISIT – MARCH 6, 2012 CORRECTIVE ACTION PLAN

Dear Ms. Lane:

Homes of Hope Foster Family Agency is submitting the following plan of correction for the deficiency findings of the March 6, 2012 Monitoring Review.

IV. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

- #32 Did the treatment team develop and timely initial needs and service plans (NSP) with the child.
- #37 Did the treatment team develop timely updated needs and service plans (NSP) with the child?

Treatment plans are tracked by Quality Assurance Department on the "Social Worker Caseload Tracking Log" and on Foster Trak Reports to ensure that the social workers stay ahead with the due dates that are coming due. In addition, deadline dates will be discussed at the Administrator's Meeting with the Social Worker Supervisors to ensure the timely submittal by the social workers to their respective supervisors.

(See Exhibit C – Social worker/Supervisor Weekly Supervision)

#36 Are DCFS county social workers contacted monthly and are the contacts appropriately documented?

email: homesofhope@verizon.net

Website: www.homesofhopeffa.com

MONITOR REVIEW CORRECTIVE ACTION PLAN Page 2

County Social worker is contacted monthly and as needed. These contacts are documented on the Weekly Progress Summary and are also tracked by Quality Assurance Social worker Caseload Tracking Log. Foster Care Social Worker has been instructed to include the date of contact on the Weekly Progress Note and include the reason for each contact.

(See Exhibit A – Weekly Progress Summary Template, Page 2) (See Exhibit B – Social Worker Caseload Tracking Log)

#38 Did the treatment team development comprehensive updates needs and service plans (NSP) with the child?

Social Worker Supervisor will ensure that the treatment plans show progress that is comprehensive and obtainable by comparing the old treatment plan with the newly submitted report.

V. EDUCATION AND WORKFORCE READINESS

#45 Does the FFA facilitate (encourage) the children's participation in YDS or equivalent services, and vocational training programs?

Social worker will follow-up with the county worker to ensure that the youth is enrolled in Youth Development Services. Homes of Hope will accomplish this by tracking when a youth will become eligible for these services. The foster care social worker will initiate a letter to the County Social Worker to remind them that the youth needs to be enrolled. This will also document the agency's efforts to facilitate and encourage the youth's enrollment through the county placement worker.

(See Exhibit D – Youth Development Services and Vocational Training Programs (See Exhibit E – Request for TILP Program and ILP Enrollment)

VI. HEALTH AND MEDICAL NEEDS

#47 Are initial medical examinations timely?

Initial medical examinations are expected within the required period of time and before the due date. The foster care social worker will document the attempts, denials for medical care and why a medical examination was not completed on time. This will be documented on the minor's weekly progress note.

(See Exhibit A)

MONITOR REVIEW CORRECTIVE ACTION PLAN - Page 3

#50 Are initial dental examinations timely?

Initial dental examinations are expected within the required period of time and before the due date. The foster care social worker will document the attempts, denials for dental care and why a dental examination was not completed on time. This will be documented on the minor's weekly progress note.

(See Exhibit A)

VII. PSYCHOTROPIC MEDICATION

#53 Is there a current psychiatrist evaluation/review for each child on psychotropic medication?

Homes of Hope Quality Assurance Department will maintain a Psychotropic Medication Record Book that will show social worker supervisor's efforts in obtaining psychotropic medication authorization, activity and child evaluations. This will be a checks-and-balance of what will be filed in the youth's record. The QA record book will include letters and faxes documenting efforts to obtain mandatory information for compliance. The Psychotropic Medication Authorization Activity Log provided by DCFS is utilized in addition to the Psychotropic Medication Log that will be reviewed weekly in management meeting.

(See Exhibit F – Psychotropic Medication Authorization Activity Log) (See Exhibit G – Psychotropic Medication Log)

MONITORING REVIEW DEFICIENCIES AND STAFF TRAINING

On March 21, 2012 at the monthly Social Worker Meeting, staff was apprised of the Facility Monitoring Review deficiencies. Training was given on each aspect of complying with policies and procedures, timeliness, contacts with CSW and proper documentation of foster care social worker's efforts in obtaining services and documents. In addition, procedures were developed as tools for compliance, (changes to forms and tracking logs for implementation). (See Exhibit H – Social Worker Meeting). Homes of Hope will continue to provide ongoing training to their social workers in these areas.

If you have any questions regarding this corrective action plan, please contact me or my Administrator, Jorge Razo, at Homes of Hope wishes to comply with the results of our monitoring review.

Singerely,

Sukhwinder Singh, Executive Director

WEEKLY PROGRESS SUMMARY Rev. 4/1/2012 MINOR: Date of this Visit: DOB: DOP: CERTIFIED HOME OF: VISIT: [] Met Privately with Minor [] Met with Foster Parent [] Other: unannounced visit LOCATION: [] Home [] School Other: IS THIS A DUAL LICENSED HOME: [] Yes []No If yes, please answer the following: Current Number of: Day Care Children: _____ Foster Care Children: Ages of Day Care Children: VISUAL CONTACT, DESCRIBE MINOR'S APPEARANCE, MOOD AT THIS VISIT: MINOR'S ADJUSTMENT TO PLACEMENT AND INTERACTION WITH THE FAMILY AND OTHERS: BEHAVIOR CONCERNS, CONSEQUENCES, DISCIPLINARY PRACTICE AND ASSESSMENT. APPROPRIATENESS (IN DETAIL): RESOLUTION TO THE BEHAVIORS PROBLEMS: LIST CHORES AND ARE THEY AGE APPROPRIATE: FAMILY VISITATIONS SIBLING VISITATIONS DURING THE WEEK, I.E., PHONE CALLS, MAIL, ETC.) ACTIVITIES INVOLVEMENT FOR THIS WEEK: (Social, Physical, Recreational, Developmental, Extracurricular): WEEKLY ALLOWANCE: Child confirms receiving his/her weekly allowance of \$ _____ How is Child Spending/Saving Money: MINOR'S NEEDS AND SERVICE PLAN: (Progress towards goals, assessments, implementation, FP feedback): CERTIFIED HOME COMPLIANCE ISSUES (List health and safety concerns not in compliance with Title 22): [] In Compliance [] Out of Compliance, (Explain):

[] Check pool locks/alarms (if applicable)

[] Cleaning supplies locked [] Check pool locks/alarm [] Medication/knives locked [] Is alcohol inaccessible

[] Check pantry/Open refrigerator [] Is child's room comfortable (heat/air)

CHANGES IN CERTIFIED FOSTER FAMILY DYNAMICS: (Divorce, job changes, death, arrests, financial resources, family members moving in or out of the home, medical or mental health issues of caregiver)

ANY VISITORS OVER THE WEEK? Yes [No [] (If Yes, please complete the following information)
Name: Age: Relationship:	Name: Age: Relationship:
MEDICAL AND DENTAL PROGRESS FOR TH	HIS WEEK ONLY (Progress, include any follow-up visits)
Explain why youth did not receive timely medical	or dental examinations. Include any supporting documentation
Is minor on any medication? If Yes, explain:	
Minor's Weight: Taken on:	
EDUCATION PROGRESS (I.E.P. Information, C	Conduct Issues in School, Homework, Grades, Scores, etc)
Is Child receiving tutoring: No Yes (If	yes, explain by whom, i.e., Foster Parent, School, Agency, etc.
EMANCIPATION AND INDEPENDENT LIVING [] Not Age Appropriate [] If age appropriate,	G PLAN – (For Minor's Age 14 and over) explain ILP Program, Contract, Services, progress:
SPECIAL INCIDENT REPORT FOR THIS WEI [] NONE [] YES – See Special Incident Report in Child's File	
Date and Brief description of Incident, i.e., "AWOL,	INJURY, HOSPITALIZATION, etc.
LAST CSW CONTACT:	
1. DATE(S) AND PROVIDE A DETAILED REA	SON FOR THE CONTACT:
2. INDICATE ANY DOCUMENTS OR SERVIC	ES REQUESTED.
****************	**************************************
MSW/FFASW	Date:
Reviewed by FFASSW	Date:

Date Printed: 4/2/2012

AGENCY SOCIAL WORKER: SANDRA SALAS TOTAL CASELOAD: 8	KER. SANDRA	SALAS																			
Hame of Clinat	Sec. 3 D.O.8	Sec. 2 D.O.P.	Data Client Estrolled (3) DAYS	Annual Pictures Pictures Pictures Pictures Pictures Pictures Pictures Pearly Plus Yearly	Sec. 2 Mext Clothing Investory (5 mest)	Section 2 Allowances Day from placement themsDue Monthly (age 5- up)	Section 4 Feater Child's Needle & Case Plen Summary (LIC 709) Due Yearly	Saction: 4 30 DAY NASP/ INTTAL ASSENENT REPORT DUR	Sec. 5 3 MO. MASP/ QUARTERLY REPORT DUE	Sec. 6 Date of Lest Paych. Eveluation DCPS (361c.) Seen by Prychiatrist	Sec. 7 Sec. 7 Date of Date of Psycho. / Nodel Last Autho. Expires Termonth	Sec. 7 Date of Last Terrevoluis	Sec. 7 Date of Last 18 Teel	Sec. 7 Health & Education Passport	Sec. 7 Deta Last Weight Record Due Moattsly	Sec. 7 Institut, J Hext Hepilical Exam Due Yourly	Sec. 7 Nexat: Dental Exam Dun every 6 most. (Age 3- up)	Sec. 8 Last Grades Racrid	Sec. 10 Last Wessloy Notes	Date of Last PYASW Caedact Weth DCFS Worker	Date of Lest Clothing Receipts
40mmmones (files)																					
Осе, Јагне	2/12/1596	3/13/2012																			

Black No Action at this time Blue Coming up within 30 days

Red - Past Due Green - Transfers

SOCIAL WORKER /SUPERVISOR WEEKLY SUPERVISION & TRAINING

Social Worker: Supervision Social Worker:	Date: Time:	
# of Certified Foster Families: # 0		
1. 2. 3 4		
List Clients		
1. 5. 6. 3 7. 4. 8.		
Children on Psychotropic Medicati	on:	
Agenda Items to Cover:		
FP ISSUES [] Discipline [] Continuing Education [] Facility Check [] Re-Certification [] Clothing Orders/Receipts [] Investigation(s) [] CPR/First Aid [] Respite/Vacation [] Family Visits [] Disaster Drill	CHILD ISSUES [] Incident/Investigation [] 30 Day Report [] Quarterly Report [] Progress Notes [] Service Plans [] Case Transfers/Respite care [] DCFS Contact (Monthly) [] Medical/Dental Visits/Follow [] Safety [] Weekly Allowance [] Clothing Checks	SW/FFA ISSUES [] Policy Issues [] Time-sheet/Payroll [] Vacation Request/Coverage [] Supervision issues [] Written Warnings [] Transportation [] AB12
TREATMENT PLANS, MEDICAL,	DENTALS, TO BE COMPLETED A	ND TURNED IN BY NEXT MEETING.
Youth		
Note:		
Homes of Hope FFA Social Worker		Date
Homes of Hope FFA Supervising	Social Worker	Date
Administrator's Review		Rev. 3/30/2012

Date Printed: 4/2/2012

YOUTH DEVELOPMENT SERVICES AND VOCATIONAL TRAINING PROGRAMS

/Dr.	
/DE	
101	
101	
101	
9	
9	
9	
- 5	
- 3	
- 5	
- 5	
- 4	
- 5	
- 5	

1											
	Date of Birth	Date of Placement	Year Child turns 16	Year Emancipation Child Preparation turns 16 Goal Contract Due Date	Initial Emancipation Preparation Contract (Age 16/older) Due Date	Every 6 mos. Emancipation Preparation Goal Contract Next Due Date	Enrolled in an Independent Living Plan Program (Age 16/older) Due Date	Initial Transitional Independent Living Plan & Agreement (Age 16 1/2 (older) Due Date	Every 6 mos. Transitional Independent Living Plan 8. Agreement Next Due Date	Iransitional Independent Living Plan (TILP) Letter Sent to CSW Date Received	Independent Living Plan Certificate of Completion on File? Date Received
	2/12/1996	2/12/1996 3/12/2012	2012								

Black – No Action at this time Blue – Coming up within 30 days Red – Past Due N/A - Doesn't Apply do to their age



HOMES OF HOPE FOSTER FAMILY AGENCY

1107 S. Glendora Avenue • West Covina, CA 91790 State Facility Licenses Number: 197803171

Telephone: (626) 814-9085

Fax: (626) 814-2276

REQUEST FOR TRANSITIONAL INDPENDENT LIVING (TILP) EMANCIPATION PREPARATION CONTRACT AND/or INDEPENDENT LIVING PROGRAM ENROLLMENT

TO:			FAX:
	Placement S	ocial Worker	
REG.	ARDING MINOR:		DOB:
In cor Place	mpliance with DCFS and o ment Social Worker on the	ther regulatory requirements, following (see as checked).	Homes of Hope is requesting/following-up with th
	The agency is prepared meet with the minor and desire. If you have alrea as we would like to assi	to assist you with the develo d/or the FFA social worker at ady developed the minor's TII st in the implementation of an	pment of the TILP by arranging an appointment to either the Agency or at the certified home if you such please send us a signed copy as soon as possibly noted goals so the minor can be fully prepared for REQUIRED AT AGE 16 ½, & EVERY 6 MONTHS
[]	TILP- Non Minor Depend	dent: Transitional Independent	Living Plan within 14 days of placement.
[]	TILP -Non Minor Depe (An update is required e	endent: Transitional Independe every 6 months from the Place	nt Living Plan Update was due on: ment Worker).
	The above named minor The agency will facilitat to the enrollment of the	e participation by placed child above named minor.	is not been enrolled in the ILP Program. Iren ages 16 and older. Please inform this agency a
	In our efforts to work of	aration contract cooperatively with the child's completion and preparation o	placement social worker, the above child will be a fithe "Emancipation Preparation Contract." Emancipation Contract for the child's file.
To ol	btain our assistance in arr rsigned at: (626) 814-90	ranging the TILP meeting, o	r if you have any questions please contact the
			FFA Contact Follow-up: Date Faxed to CSW:
l Worl	ker (Print)	Signature	Date Mailed to CSW:
3/20/12			1 st Follow-up Call:
3/20/12	-Va		2nd Follow-up Call:

	Date of Placement:
Agency Name:	Foster Child Name:

PSYCHOTROPIC MEDICATION AUTHORIZATION ACTIVITY LOG

All contact efforts to obtain Psychotropic Medication Authorizations, including telephone, email, and/or fax, must be documented on this log in order to be fully acknowledged by DCFS.

Purpose / Outcome of Contact					
Type of Contact					
Name/Position of Contacted Party					
Name of FFA Staff					
Date of Contact					

CHILDREN ON PSYCHOTROPIC MEDICATION

2017	Count	V
March 26, 2012	Physician	
	Psychotropic Medication(s)	Concerta 72 mg Trazaslure 50mg
	Court	
	Date Court Authorization Case # Received On	02/29/12
	Expiration Follow-up*	
	Date of Last Date of Court Psychiatric Expiration Medication Log	7/27/12
The second secon	Date of Last Psychiatric Medication Log	2/12
	Date of Psychiatrist Visits	Every Other Month
	Last atric tion orm)	27/12
	FFASW	
	SUPERVISOR FFASW	
	Date of Birth	11/30/99
	Client's Name	Doc, Jane

REPORT SUMMARY
I CURRENT

0 Denied received.

0 PENDING 0 NOT CURRENT/ PAST DUE

* Delete information after court order is

Blue – Due in 30 Days Red – Past Due . .

County: LA - Los Angeles OC - Orange County SB - San Bernardino

Homes of Hope Foster Family Agency

1107 S. Glendora Avenue, West Covina, CA 91790 - (626) 814-9085

SOCIAL WORK DEPARTMENT FAX: (626) 960-9125

FACSIMILE TRANSMITTAL SHEET

DATE:	April 5, 2012
TO:	Elaine Lane Monitor
AGENC	CY: Bureau of Home Care Management Division, 9320 Telstar Ave, El Monte, CA 91731
	FAX NUMBER: (626) 572-2367
	REGARDING: Corrective Plan Action Plan
	A: Jorge Razo, Administrator
Number	r of pages, including cover sheet:
COMM	IENTS:
Dear	Ms. Lane.
	er your request regarding, the audit (Corrective Action Plan page #3) reference staff training. Please trached supporting documents.
2	Monthly Social work Meeting and Training, March 21, 2012 – Sign In Sheet Homes of Hope foster Family Agency Staff Education and Training, April 5, 2012 – Sign In Sheet Instructor: Title: Social Worker Supervision. Total Hours 1.5 Homes of Hope Foster Family Agency Staff Education and Training, April 5, 2012 – Sing In Sheet Instructor: Title: Social Worker Supervision. Total Hours 1.5
If you	u have any questions please fell free to contact me at 626.814.9085.
	ectfully, Razo- Administrator
LIFY	For Your Review X Per Your Request For Your Signature & return

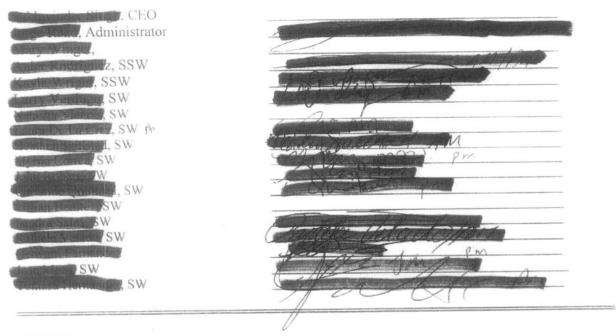
IMPORTANT: This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone, and return the original message to us at the above address via the U.S. postal service. Thank you.



MONTHLY SOCIAL WORK MEETING AND TRAINING

March 21, 2012 Time: 9:00AM TO 11:00AM 5:30pm-7:30pm

ATTENDEES:



TOPICS:

- 1. Audit
 - -Monitoring Review Sheet
- 2. Weekly Home Visitation Checklist Summary
- 3. Children on Psychotropic Medication
 - -Psychiatric Evaluation 561c Form

 - -Psychiatric Medication Log
- 4. Social Workers Responsibilities/Tracking Logs/ Case Assignments/Client& Family Visitations/Phone Calls/ Respites
- 5. Receipts
- 6. Continuation Training Hours
- 7. Video Checklist
- 8. Child Court Status
- 9. Time Sheets
- 10. Independent Living and Emancipation Programs
- 11. AB-12
 - -Updates
 - Trainings for Foster Parent
- 12. Chain of Command
- 13. SIR's- Protocol
- 14. NSP/Qty*s/Progress
- 15. Supervision

HOMES OF HOPE FOSTER FAMILY AGENCY STAFF EDUCATION AND TRAINING SIGN-IN SHEET

DATE: 4 5 12012 TOTAL HOURS: 1.5

COURSE TITLE: Monitoring Review Corrective Plan Social Worker Re-Training

- 1. Medical and Dental Examinations and Psychotropic Medication (timeliness/deadlines)
- 2. Needs and Service Plans (timeliness and comprehensive updates)
- 3. New Weekly Visitation Summary Report "CSW Contacts and documentation"
- 4. Youth Development Services New Procedures and ILP forms, Follow-ups with CSW

Name (Print)	Signature	Title
	1	
19-20-75-76-76-76-76-76-76-76-76-76-76-76-76-76-		FFASIV
Laborator Schools and Section	THE STREET	FFASW FFASW
STATE STATE OF THE		FFASU
Contract Comment		FFASA

Attach materials relevant to the training topic to this sign-in.

HOMES OF HOPE FOSTER FAMILY AGENCY STAFF EDUCATION AND TRAINING SIGN-IN SHEET

T	Law or	The same		計
Instructor: -	1	- Contraction of	4	No.
	-1		4	* O *

Title: Work Supervison

DATE: USI2

TOTAL HOURS: 1.5

COURSE TITLE:

Monitoring Review Corrective Plan Social Worker Re-Training

- 1. Medical and Dental Examinations and Psychotropic Medication (timeliness/deadlines)
- 2. Needs and Service Plans (timeliness and comprehensive updates)
- 3. New Weekly Visitation Summary Report "CSW Contacts and documentation"
- 4. Youth Development Services New Procedures and ILP forms, Follow-ups with CSW

Name (Print)	Signature	Title
A lane (i time)	1 1	FFSW
7 3	7-11/11	FFANT FESW.
	4SW	FCSW.
V	1310	

Attach materials relevant to the training topic to this sign-in.

hagar not